

SEP 10 2007

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No : 10/711,469
Applicant : Zamfes
Filed : September 20, 2004
Title : Formation Gas Pore Pressure
Evaluation on Drilling Cuttings Samples

TC/A.U. : 2856
Examiner : Fitzgerald, J.

COMMISSIONER FOR PATENTS
PO Box 1450
Alexandria, VA 22313-1450

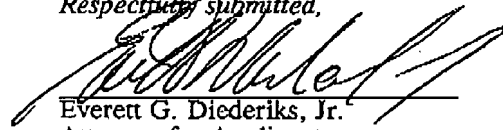
Via Facsimile
571-273-8300
10 Pages

Sir:

The below identified communication(s) or document(s) is(are) submitted in the above application or proceeding:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Amendment/Response | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Information Disclosure Statement with ___ref. | <input type="checkbox"/> Check in the Amount of \$ |
| <input checked="" type="checkbox"/> Petition For Three Month Extension of Time | <input type="checkbox"/> Assignment |
| <input checked="" type="checkbox"/> Revocation and Appointment of Attorney | <input type="checkbox"/> Associate Power of Attorney |
- ☒ Please charge **Deposit Account Number 04-1075** for any deficiency or surplus in connection with this communication. A duplicate copy of this sheet is provided for use by the Deposit Account Branch.

Respectfully Submitted,


Everett G. Diederiks, Jr.
Attorney for Applicant
Registration Number: 33,323

Date September 10, 2007

RECEIVED
CENTRAL FAX CENTER

SEP 10 2007

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No : 10/711,469
Applicant : Zamfes
Filed : September 20, 2004
Title : Formation Gas Pore Pressure
Evaluation on Drilling Cuttings Samples

TC/A.U. : 2856
Examiner : Fitzgerald, J.

COMMISSIONER FOR PATENTS
PO Box 1450
Alexandria, VA 22313-1450

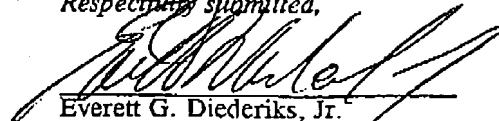
Via Facsimile
571-273-8300
10 Pages

Sir:

The below identified communication(s) or document(s) is(are) submitted in the above application or proceeding:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Amendment/Response | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Information Disclosure Statement with ___ ref. | <input type="checkbox"/> Check in the Amount of \$ |
| <input checked="" type="checkbox"/> Petition For Three Month Extension of Time | <input type="checkbox"/> Assignment |
| <input checked="" type="checkbox"/> Revocation and Appointment of Attorney | <input type="checkbox"/> Associate Power of Attorney |
- ☒ Please charge Deposit Account Number 04-1075 for any deficiency or surplus in connection with this communication. A duplicate copy of this sheet is provided for use by the Deposit Account Branch.

Respectfully Submitted,


Everett G. Diederiks, Jr.
Attorney for Applicant
Registration Number: 33,323

Date September 10, 2007